

Client Services New Features Validation – Scenario #04

System Name:	Client Services	Certification Scenario #:	04
Contract Provider Name:		Legal Entity #:	
Contact Name:		Phone #:	
Email Address:			
Test Scenario Name:	New_Features_Validation	# of Steps to be Completed:	8

Purpose of Scenario: This script is intended for Trading Partners (Legal Entities) who have been previously certified on IBHIS Client Services. Trading Partner's must demonstrate the ability to successfully leverage enhancements to the Client Services in the Admission; and ICD10 Diagnosis domains using the latest published client service.

Please see the instructions below and start from Step # 1:

Instructions:

- Before creating a new Client record, TPs are expected to conduct a Client search to minimize client duplication. For this scenario you are expected to create a new client. If the client you plan to use already exists, please create a another client.
- Please come up with a unique name (e.g. Broken Chair or Jumbo Shrimp) as you search and create the Client record. This will increase the likelihood that your client will not already exist in IBHIS.
- Trading Partners (TPs) are be required to submit the values specified in this script unless otherwise noted.
- All items in **Red** font must be provided and documented in this script by Trading Partners.
- For data elements that do not pertain to your agency, delete the value in the input column and state 'Left Blank'. For example: If your agency doesn't use 'County School' data element and the script is asking to input a value, delete the value and state 'Left Blank'.
- This script is intended for Trading Partners which provide outpatient services. When submitting web service requests, the <Admission24Hour > node should not exist in your submission.

Step # 1:

Operation: *SearchClient*

Scenario: Searching for a client that does not exist in IBHIS.

Input Data for Operation (To Be Completed by the LEs)	Discrepancy Between Input Data and Avatar (DMH Use Only)	Pass/Fail (DMH Use Only)
Client ID: Leave blank		
Client First Name: (Enter the Client First Name) _____		
Client Last Name: (Enter the Client Last Name) _____		
Date of Birth: 1985-10-15		
Social Security Number: Leave blank		
Medical Policy Number: Leave blank		
Gender: F		
Alias: Leave blank		

(Expected Result)

Operation: *SearchClient*

Output: <ErrorCode>0005</ErrorCode>

<ErrorDescription>The matching record is not found with the criteria you are looking for. source:

Avatar</ErrorDescription>

Note: If the Client name you are searching for is truly unique, you should not see any results in the output. Instead you will receive the 'Matching Record Not Found' error above

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Step # 2:		
Operation: <i>AdmitNewClient</i>		
Scenario: Admitting a new client in IBHIS with the enhanced data attributes – such as [Ethnicity], [ClientOtherRace], [SmokingAssessment] and [SmokingAssessmentDate].		
Input Data for Operation (To Be Completed by the LEs)	Discrepancy Between Input Data and Avatar (DMH Use Only)	Pass/Fail (DMH Use Only)
Client Prefix: Ms		
Client First Name: (Enter the Client First Name) _____		
Client Middle Initial: A		
Client Last Name: (Enter the Client Last Name) _____		
Client Suffix: IV		
Alias: (leave blank)		
Email: any@nowhere.com		
Gender: F		
Date of Birth: 1985-10-15		
Social Security Number: 123129876		
Marital Status: Single		
Primary Language: English		
Education: AA		
Employment Status: CW		
Client Other Race: UnknownNotReported		
Ethnicity: UnknownNotReported		
Smoking Assessment: NeverSmoked		
Smoking Assessment Date: 2015-03-30		
Living Arrangements: 1		
Client's Home Phone: 5625551212		
Street Address 1: 123 Some Place Lane		
Street Address 2: Suite 10		
ZIP Code: 90005-0000		
Admission Date: 2015-03-01		
Admission Time: 11:55AM		
Type of Admission: Elective		
Admitting Staff NPI: (Enter the Practitioner NPI) _____		
(Items in Red Font To Be Completed by the LEs) Operation: <i>AdmitNewClient</i> IBHIS Acknowledgement: "Client Admission web service has been filed successfully." IBHIS Client ID: IBHIS Episode ID: 1 IBHIS Client Prefix: Ms IBHIS Client First Name: IBHIS Client Middle Initial: A IBHIS Client Last Name: IBHIS Client Suffix: IV		

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Step # 3: Operation: <i>UpdateClientDetails</i> Scenario: Updating Client Demographics and CSI information with enhanced attributes- such as [Ethnicity], [ClientOtherRace], [SmokingAssessment] and [SmokingAssessmentDate].		
Input Data for Operation <i>(Update the Client's record with the values defined below in blue.)</i>	Discrepancy Between Input Data and Avatar <i>(DMH Use Only)</i>	Pass/Fail <i>(DMH Use Only)</i>
Client ID: (Enter the Client ID returned in Step #2)		
Episode ID: 1		
Client Prefix: Mrs		
Client First Name: (Update the Client First Name entered in Step #2 by entering a different name)		
Client Middle Initial: M		
Client Last Name: (Update the Client Last Name entered in Step #2 by entering a different name)		
Client Suffix: III		
Alias: Butterfly		
Email: Any@nowhere.com		
Gender: F		
Date of Birth: 1985-01-15		
Social Security Number: 123129899		
Marital Status: Married		
Primary Language: English		
Education: BA		
Employment Status: FC		
Client Other Race: Other		
Ethnicity: NotHispanicOrLatino		
Smoking Assessment: FormerSmoker		
Smoking Assessment Date: 2015-04-02		
Clients Home Phone: 5625552121		
Street Address 1: 1234 Some Place Ave		
Street Address 2: Suite 1		
ZIP Code: 90005-4545		
Birth First Name: (Update Birth First Name entered in Step #3 by entering a different name)		
Birth Last Name: (Update Birth Last Name entered in Step #3 by entering a different name)		
Birth Middle Name: (Update Birth Middle Name entered in Step #3 by entering a different name)		
Mothers First Name: (Update Mothers First Name entered in Step #3 by entering a different name)		
Fiscally Responsible County for Client: Orange		
Place of Birth County: 19		

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Step # 3: CONTINUED...		
Place of Birth State: CA		
Place of Birth Country: US		
Admission Necessity Code: PlannedPriorAuth		
Conservatorship/Court Status: LPS		
Special Population: NoSpecPop		
Legal Class: Voluntary		
County School: 30056		
Number of Dependents Less than 18 Year Old: 1		
Number of Dependents Over 18 Year Old: 3		
Preferred Language: 7		
CSI Ethnicity: U		
CSI Race 1: 3		
CSI Race 2: 5		
<p><i>(Items in Red Font To Be Completed by the LEs)</i></p> <p>Operation: UpdateClientDetails</p> <p>IBHIS Acknowledgement: "Client Demographics web service has been filed successfully."</p> <p>IBHIS Client ID:</p> <p>IBHIS Client First Name:</p> <p>IBHIS Client Last Name:</p> <p>IBHIS Client Middle Initial: M</p> <p>IBHIS Client Prefix: Mrs</p> <p>IBHIS Client Suffix: III</p>		

Step # 4:			
Operation: GetClientDetails			
Scenario: Retrieving Demographics and CSI information to verify updates.			
Input Data Element	Values Entered in the Input		
Client ID:	(Enter the Client ID returned in Step #2)		
Output Data Element	Expected Values	Discrepancy	Comment for Discrepancy (DMH Use Only)
Client ID:	Client ID returned in Step #2		
Client Prefix:	MRS		
Client First Name:	Client First Name entered in Step #3		
Client Middle Initial:	M		
Client Last Name:	Client First Name entered in Step #3		
Client Suffix:	III		
Alias:	Butterfly		
Email:	Any@nowhere.com		
Gender:	F		
Date of Birth:	1985-01-15		
Social Security Number:	123129899		
Marital Status:	Married		
Primary Language:	English		
Education:	BA		
Employment Status:	FC		
Client Other Race:	Other		
Ethnicity:	NotHispanicOrLatino		
Step # 4: CONTINUED...			

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Smoking Assessment:	FormerSmoker		
Smoking Assessment Date:	2015-04-02		
StreetAddress1:	1234 Some Place Ave		
StreetAddress2:	Suite 1		
City:	LOS ANGELES		
State:	CA		
ZipCode:	90005-4545		
Clients Home Phone:	5625552121		
Birth First Name:	Birth First Name entered in Step #5		
Birth Last Name:	Birth Last Name entered in Step #5		
Birth Middle Name:	Birth Middle Name entered in Step #5		
Mothers First Name:	Mothers First Name entered in Step #5		
Fiscally Responsible County For Client:	Orange		
Place of Birth County:	19		
Place of Birth State:	CA		
Place of Birth Country:	US		
Preferred Language:	7		
Admission Necessity Code:	PlannedPriorAuth		
Conservatorship / Court Status:	LPS		
Special Population:	NoSpecPop		
Legal Class:	Voluntary		
County School:	30056		
Number of Dependents Less than 18YO:	1		
Number of Dependents Over 18YO:	3		
CSI Ethnicity:	U		
CSI Race 1:	3		
CSI Race 2:	5		

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Step # 5:		
Operation: <i>CreateClientDiagnosis</i>		
Scenario: Creating an ICD10 diagnosis entry. The submission must contain one Primary, one Secondary and one Tertiary diagnosis.		
Input Data for Operation (To Be Completed by the LEs)	Discrepancy Between Input Data and Avatar (DMH Use Only)	Pass/Fail (DMH Use Only)
Client ID: (Enter the Client ID returned in Step #2)		
Episode ID: 1		
Date of Diagnosis: 2015-03-01		
Type of Diagnosis: Admission		
Trauma: Unknown		
General Medical Condition Summary Code: UnknownNotReported		
Substance Abuse / Dependence: Yes		
Substance Abuse / Dependence Diagnosis: F10.120		
Primary Diagnosis:		
Diagnosing Staff NPI: _____		
Diagnosis Billing Order: 1		
Status: Active		
Diagnosis Ranking: DiagnosisRankingPrimaryType		
Ranking: Primary		
ICD10Code: F03.91		
Secondary Diagnosis:		
Diagnosing Staff NPI: _____		
Diagnosis Billing Order: 2		
Status: Active		
Diagnosis Ranking: DiagnosisRankingNonPrimaryType		
Ranking: Secondary		
ICD10Code: F01.50		
Tertiary Diagnosis:		
Diagnosing Staff NPI: _____		
Diagnosis Billing Order: 3		
Status: Working		
Diagnosis Ranking: DiagnosisRankingNonPrimaryType		
Ranking: Tertiary		
ICD10Code: Z91.49		
(Items in Red Font To Be Completed by the LEs)		
Operation: <i>CreateClientDiagnosis</i>		
IBHIS Acknowledgement: "Client Diagnosis web service has been filed successfully."		
IBHIS Client ID:		
IBHIS DiagnosisUniqueID:		
IBHIS DiagnosisCodeEntryRowID:		
IBHIS DiagnosisRanking: Primary		
IBHIS ICD10Code: F03.91		
IBHIS DiagnosisStatus: Active		
IBHIS DiagnosisCodeEntryRowID:		
IBHIS DiagnosisRanking: Secondary		
IBHIS ICD10Code: F01.50		
IBHIS DiagnosisStatus: Active		
IBHIS DiagnosisCodeEntryRowID:		
IBHIS DiagnosisRanking: Tertiary		
IBHIS ICD10Code: Z91.49		
IBHIS DiagnosisStatus: Working		

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Step # 6: Operation: <i>UpdateClientDiagnosis</i> Scenario: Updating an ICD10 diagnosis entry.		
Input Data for Operation <i>(To Be Completed by the LEs)</i> <i>(Update the Client's record with the values defined below in blue.)</i>	Discrepancy Between Input Data and Avatar <i>(DMH Use Only)</i>	Pass/Fail <i>(DMH Use Only)</i>
Client ID: (Enter the Client ID returned in Step #2)		
Episode ID: 1		
DiagnosisUniqueID: Enter the DiagnosisUniqueID returned in <i>GetClientDiagnosis</i>		
Type of Diagnosis: Admission		
Trauma: No		
General Medical Condition Summary Code: HeartDis		
Substance Abuse / Dependence: Yes		
Substance Abuse / Dependence Diagnosis: F18.94		
Diagnosis Code Entry Row ID: Enter the DiagnosisCodeEntryRowID returned for Primary diagnosis in <i>GetClientDiagnosis</i>		
Diagnosing Staff NPI: _____		
Diagnosis Billing Order: 1		
Diagnosis Status: DiagnosisStatusType		
Status: Active		
Diagnosis Ranking: DiagnosisRankingPrimaryType		
Ranking: Primary		
ICD10Code: F03.90		
Diagnosis Code Entry Row ID: Enter the DiagnosisCodeEntryRowID returned for Secondary diagnosis in <i>GetClientDiagnosis</i>		
Diagnosing Staff NPI: _____		
Diagnosis Billing Order: 2		
Diagnosis Status: DiagnosisStatusType		
Status: Working		
Diagnosis Ranking: DiagnosisRankingNonPrimaryType		
Ranking: Secondary		
ICD10Code: F04		
<p><i>(Items in Red Font To Be Completed by the LEs)</i></p> <p>Operation: <i>UpdateClientDiagnosis</i></p> <p>IBHIS Acknowledgement: "Client Diagnosis web service has been filed successfully."</p> <p>IBHIS Client ID:</p> <p>IBHIS DiagnosisUniqueID:</p> <p>IBHIS DiagnosisCodeEntryRowID:</p> <p>IBHIS DiagnosisStatus: Active</p> <p>IBHIS DiagnosisRanking: Primary</p> <p>IBHIS ICD10Code: F03.90</p> <p>IBHIS DiagnosisCodeEntryRowID:</p> <p>IBHIS DiagnosisStatus: Working</p> <p>IBHIS DiagnosisRanking: Secondary</p> <p>IBHIS ICD10Code: F04</p> <p>IBHIS DiagnosisCodeEntryRowID:</p> <p>IBHIS DiagnosisStatus: Working</p> <p>IBHIS DiagnosisRanking: Tertiary</p> <p>IBHIS ICD10Code: Z91.49</p>		

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Step # 7: Operation: <i>GetClientDiagnosis</i> Scenario: Verifying an ICD10 diagnosis entry update.			
Input Data Element	Value to be entered		
<i>Client ID:</i>	(Enter the Client ID returned in Step #2)		
<i>Episode ID:</i>	1		
Output Data Element	Expected Values	Discrepancy	Comment for Discrepancy (DMH Use Only)
<i>Client ID:</i>	Client ID entered in Step #2		
<i>Episode ID:</i>	1		
<i>Episode Program ID:</i>	Contract Provider's Program ID		
<i>Diagnosis Unique ID:</i>	This should be the same value returned in the output of <i>UpdateClientDiagnosis</i>		
<i>Date of Diagnosis:</i>	2015-03-01		
<i>Type of Diagnosis</i>	Admission		
<i>Trauma:</i>	No		
<i>General Medical Condition Summary Code:</i>	HeartDis		
<i>Substance Abuse Dependence:</i>	Yes		
<i>Substance Abuse Dependence Diagnosis:</i>	F18.94		
<i>DiagnosisCodeEntryRowID:</i>	This should be the same value returned in the output of <i>UpdateClientDiagnosis</i> for Primary Diagnosis		
<i>Diagnosing Staff NPI:</i>	Practitioner NPI entered in <i>UpdateClientDiagnosis</i> for Primary Diagnosis		
<i>Diagnosis Status:</i>	Active		
<i>Diagnosis Ranking:</i>	Primary		
<i>Diagnosis Billing Order:</i>	1		
<i>ICD 10 Code:</i>	F03.90		
<i>DiagnosisCodeEntryRowID:</i>	This should be the same value returned in the output of <i>UpdateClientDiagnosis</i> for Secondary Diagnosis		
<i>Diagnosing Staff NPI:</i>	Practitioner NPI entered in <i>UpdateClientDiagnosis</i> for Secondary Diagnosis		
<i>Diagnosis Status:</i>	Working		
<i>Diagnosis Ranking:</i>	Secondary		
<i>Diagnosis Billing Order:</i>	2		
<i>ICD 10 Code:</i>	F03.90		
<i>DiagnosisCodeEntryRowID:</i>	This should be the same value returned in the output of <i>UpdateClientDiagnosis</i> for Tertiary Diagnosis		
<i>Diagnosing Staff NPI:</i>	Practitioner NPI entered in <i>UpdateClientDiagnosis</i> for Tertiary Diagnosis		
<i>Diagnosis Status:</i>	Working		
<i>Diagnosis Ranking:</i>	Tertiary		
<i>Diagnosis Billing Order:</i>	3		
<i>ICD 10 Code:</i>	Z91.49		

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Step # 8: Operation: <i>GetClientDiagnosisHistory</i> Scenario: Retrieving an existing client's diagnosis summary.			
Input Data Element	Value to be entered		
<i>Client ID:</i>	3038678		
<i>Episode ID:</i>	Leave Blank		
Output Data Element	Expected Values	Discrepancy	Comment for Discrepancy (DMH Use Only)
<i>Client ID:</i>	3038678		
<i>Episode ID:</i>	1		
<i>Episode Program ID:</i>	00502		
<i>Date of Diagnosis:</i>	2015-04-01		
<i>Type of Diagnosis:</i>	Admission		
<i>Diagnosing Staff NPI:</i>	1396867867		
<i>Diagnosis Ranking:</i>	Primary		
<i>Diagnosis Status:</i>	Active		
<i>ICD10 Code:</i>	F03.91		